## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 23, 2007 08:00 AM DOCUMENT # P03000104950 Secretary of State MEL'S CLEANING SERVICE, INCORPORATED Principal Place of Business Mailing Address 2841 VERMONT AVE P.O. BOX 2474 EATON PARK, FL 33840 EATON PARK, FL 33840 01112007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-2413838 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **BROCK, MELINDA** DO NOT WRITE 2841 VERMONT AVENUE EATON PARK, FL 33840 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent argusture required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE NAME **BROCK, MELINDA** STREET ADDRESS 2841 VERMONT AVENUE CITY-ST-ZIP EATON PARK, FL 33840 U00000599248 TITLE NAME 01/25/07-80019-016 150.00 STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITL F IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

STREET ADDRESS CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/07

\$63-666-89 13 Date Dayting Phone #

**FILED**